ORIGINAL

CLERK US DISTRICT COURT

NORTHERN DIST. OF TX

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AO 239 (01/09) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

2017 HM 12 DM 3-23

United States District Court

for the

Northern District of Texas

PUTY CLERK

Chibueze C. Anaeme Plaintiff/Petitioner 3-12CV-1820M

Civil Action No.

United States of America

Allied Security Holdings, LLC, Allied Barton Security Services, San Diego Police De Application to proceed in district court without prepaying fees or costs

(Long Form)

Affidavit in Support of the Application

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Signed:

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: June 5, 2012

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	amount di	nonthly income uring the past 12 months	Income amount expected next month		
	You	Spouse	You	Spouse	
Employment	\$&	s N/A	\$-0	* NA	
Self-employment	\$ 0	\$ NA	\$ 0	s NA	
Income from real property (such as rental income)	\$ 0	\$ N A	\$ 0	s NA	
Interest and dividends	\$ 0	s ·N/ A	\$ 0	s NA	
Gifts	\$	\$ N/A	\$	s N/A	
Alimony	\$ 🕖	\$ N/A	\$ 🔿	s N/A	
Child support	\$ 💍	\$ N/A	\$ O	\$ N/A	

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Retirement (such as social security, pensions, annuities, insurance)	\$	Ò	\$ 7	A	\$ <i>O</i>	\$ N	A
Disability (such as social security, insurance payments)	\$	0	\$ 7	A	\$ <i>O</i>	\$ N	A
Unemployment payments	\$	O	\$ 14	A	\$ <i>O</i>	\$ N	A
Public-assistance (such as welfare)	\$	0	\$ N	IA	\$ <i>O</i>	\$ 7	A
Other (specify): [receive gifts or . loans from well-wishers and fre	\$	Varies	\$ N	IA	s Varies	\$ N	A
ance encounters for varied and dictable amounts of all monthly income	\$ \	laries 0.00	\$ N	A 0.00	\$Vavies0.00	\$ N	A 0.00

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
Unemployed Lai	4 Clo General Delivery U.S. Post office - Midwi	ay N/A	s N/A
student and Independent Cont			\$

Clinical and Consultant pharmacist.

List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

mployer Address Da		Dates of employment	Gross monthly pay
NA	· NA	NA	S NA
			\$
			\$

4. How much cash do you and your spouse have? \$ 6.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
NONE	NONE	\$ <i>O</i>	s 0
NA	NA	s NA	s N/A
N/A	NA	s NA	\$ N/A

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary

(01/09) Application to		

5.

household furnishings.

Name (or, if under 18, initials only)

None

Assets owned by you or your spouse					
Home (Value) Current	y in controversy		\$ 200,000 approx.		
Other real estate (Value)			\$ 6		
Motor vehicle #1 (Value) Curve	untly in Controver	3)x	\$		
l e	7 Toyota Sienna	/	A CONTROL OF THE CONT		
Model: Spen	na (Minivan)	i	A STATE OF THE STA		
Danishmet - 4 Lien	Holder Toyota Financial can Toyota, Albuquer	Service			
Motor vehicle #2 (Value) Curre		<i>y</i> ,	\$		
Make and year: 200	5 Dodge Grand Car	avan			
Model: Dodge	Frand Caravan				
Registration #: Lien	Holder Franklin Capit 2 Dodge, Albuquerque	al Corp	0/ATO,		
Other assets (Value)			\$ 0		
Other assets (Value)			\$ 0		
6. State every person, business,	or organization owing you or your spo	use money,	and the amount owed.		
Person owing you or your spouse money	Amount owed to you	Am	ount owed to your spouse		
Heritage Security Service San Diego, CA	\$ Over \$300 million appr	s /	VA		
Warburg Pincus LLC/ Medical Staffing Netwo		S YOY	NA		
Walgreen Co	\$400 million approx	\$	NA		
San Diego County, CA 7. State the persons who rely on	you or your spouse for support.	prox	NA		

Relationship

Age

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8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included? Yes No Is property insurance included? Yes	s 0	s N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ ()	s N/A
Home maintenance (repairs and upkeep)	s 9	s NJA
Food	\$ 450	s NA
Clothing	\$ 50	s N/A
Laundry and dry-cleaning	\$ 30	s N/A
Medical and dental expenses	s 1000 (owe) N/A
Transportation (not including motor vehicle payments)	\$ 300	s N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 20	s N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	s <i>O</i>	s N/A
Life:	s 0	s N/A
Health:	s 0	s N/A
Motor vehicle:	s ()	s n/A
Other: See Credit Report	\$	s N/A
Taxes (not deducted from wages or included in mortgage payments) (specify):	s ()	s N/A
Installment payments See Credit Report		
Motor vehicle: Total Bill \$14,000 approx	s	s N/A
Credit card (name): Capital One VISA/MC, Mellon	\$	s N/A
Department store (name): Target Macys, Mervyns	\$	s N/A
J. Crenny - lotal Bill \$5000 approx. An Other: Household Finance. Corporation, Bank of	\$	s N/A
Alimony, maintenance, and support paid to others San Diego, Scripp	Mercy O	s N/A
Motor vehicle: Total Bill \$14,000 approx Credit card (name): Capital One Vistome, Mellon Bank VISA. Department store (name): Target Macys Mervyns, J. C. Penny - Total Bill \$5000 approx. Other: House hold Finance Corporation, Bank of America, Wellstargo Bank, Medical Bills-Sharp H. Alimony, maintenance, and support paid to others Hospital, San.	Drego-Total B 50,000 ap	ill prox (st

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Regul stateme	ar expenses for operation of business, profession, or farm (attach detailed ent)	s ()		s N/A
Other	(specify): Litigation/Photocopying, mailing ete	\$ 360		s N/A
	Total monthly expenses:	\$1210	0.00	s N/A 0.00
9.	Do you expect any major changes to your monthly income or expenses next 12 months?			
	Yes No If yes, describe on an attached sheet. In creation	eased Li	tigā ës	tion expense
10.	Have you paid — or will you be paying — an attorney any money for so including the completion of this form? ☐ Yes No	ervices in com	nection	with this case,
	If yes, how much? \$ Don't Know Yet If yes, state the attorney's name, address, and telephone number:			
11.	Have you paid — or will you be paying — anyone other than an attorne for services in connection with this case, including the completion of the	y (such as a par is form?	alegal or Ye:	<i>a typist)</i> any money S □ No
	If yes, how much? \$ Dont Know Yet If yes, state the person's name, address, and telephone number: Liting atton Costs.			
12.	Provide any other information that will help explain why you cannot pa See Credit Report	y the costs of	these pr	oceedings.
13.	Identify the city and state of your legal residence. Albuquerous, New Mexico			
	Your daytime phone number: (212) 808 - 0310 Ten	nporar	y.	
	Your age: 58 Your years of schooling: 6 years			
	Last four digits of your social-security number: 05'98			

with